

# ATN 138: YouThrive Summary of Study Results

## Full Title

Adolescent Medicine Trials Network for HIV & AIDS Interventions Protocol 138: Connecting Youth and Young Adults to Optimize ART Adherence Through the Interactive YouThrive WebApp

## Study Description

Youth living with HIV (YLWH) face a number of challenges to having an undetectable viral load (that is, a substantially low number of HIV virus in the body so that tests cannot detect it). These include having access to youth-centered HIV healthcare, insurance costs, having transportation to and from clinic appointments, and HIV stigma, as well as mental health challenges that make it harder to take HIV medications each day. Although there are programs to encourage people living with HIV to take their HIV medications as prescribed, many are tailored to adults and few show that they are effective in meeting this goal. Most youth in the US use technology such as mobile phones and laptops, and there is an increasing recognition of the importance of developing programs that use these technologies to encourage adherence to HIV medications among YLWH.

The YouThrive study was designed to test how a webapp (that is a website that appears and functions similar to a mobile app) may or may not improve how often YLW aged 15-24 years take oral HIV medication. The YouThrive webapp included peer interactions, daily youth-centered content on living with HIV and HIV medications, a feature to track personal HIV medication adherence, and goal setting.

Between August 2019 and December 2021, 208 participants between the ages of 15 and 24 and were living with HIV were enrolled in the YouThrive study. Participants were enrolled from 8 ATN [Adolescent Medicine Trials Network] sites across the United States (Atlanta, GA; Charlotte, NC; Chapel Hill, NC; Chicago, IL; Houston, TX; Bronx, NY; Philadelphia, PA; and Tampa, FL). After enrollment, participants were randomly assigned to receive either the YouThrive webapp or a weekly email newsletter that contained information about relevant topics (for example, mental health) for youth, but no information about adhering to HIV medications. The intervention lasted for 5 months, after which all participants completed a survey and over half (58%) had their viral load measured.

## Study Results

- Most (84%) of YLWH in YouThrive had an undetectable viral load (<50 copies of HIV) at the start of the study, and 79% of them had an undetectable viral load at the end of 5 months. In comparison, 65% of YLWH in the control group had an undetectable viral load at the beginning of the study and 67% of them had an undetectable viral load at the end of the study.

- After 5 months, YLWH who received YouThrive did not report taking their HIV medications more often compared to youth in the control group, and viral load was similar at the end of the study between the two groups.
- Among the 120 participants with complete data, two-thirds of them had an undetectable viral load (<50 copies of HIV) at the start of the study and at end of the study. Three quarters (75%) of participants in YouThrive had an undetectable viral load at both the start and end of the study, compared to 56% of youth in the control group, although this was not statistically significant.

## Study Implications

YouThrive does not appear to increase how often YLWH take their HIV medication. However, YouThrive is a “light touch” intervention that may be combined with more intensive interventions in the future to support HIV medication taking among YLWH.

## Authors

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